GOVERNMENT OF INDIA
HEALTH AND FAMILY WELFARE
LOK SABHA

UNSTARRED QUESTION NO:2031
ANSWERED ON:31.07.2015
Asha Bahu
Verma Smt. Rekha Arun

Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether the Government has formulated/proposes to formulate any new scheme named Asha Bahu for providing health care in rural and backward areas of the country;

(b) if so, the details, salient features and objectives thereof along with the honorarium fixed thereunder; and

(c) the funds earmarked, allocated and spent by the Government under the said scheme during each of the last three years and the current year, State/UT-wise?

Answer

(a) & (b): One of the key components of the National Rural Health Mission and now the National Health Mission has been a trained female community health activist Accredited Social Health Activist or ASHA. The salient features and objectives of this key component are as below:
(i) The ASHA is a women selected by the community who is resident in the community, trained and supported to function in her own village to improve the health status of the community by enabling improved health care practices and behaviours, healthcare provisions and securing peoples access to healthcare services as is feasible at the community level.

(ii) She forms a critical link between the community and the public health system. Usually, an ASHA is engaged for a population of 1000. In tribal and hilly areas, ASHAs may be engaged per hamlet.

(iii) ASHA must be a woman resident of the village, preferably 'Married/Widow Divorced / Separated' and preferably in the age group of 25 to 45 years.

(iv) She should be a literate woman with formal education upto Class 8 though Class 10 pass should be given preference if suitable candidate is available.

(v) The roles and responsibilities of an ASHA include as under:
- A facilitator or link worker − where there is low use of health services, the ASHA enables people to access health services.
- A volunteer and activist- to enable access to health entitlements and reaching the marginalized.
- A community level care provider- important for her credibility, to respond to local health needs, particularly in underserved areas.

(vi) ASHAs are envisaged as honorary volunteers and accordingly they are not given fixed monthly honorarium and are given performance based incentives for tasks performed by them.

(vii) Support for ASHAs is provided to State/UT Governments based on the required posed by States/UTs in their Programme Implementation Plans (PIPs).

(c): The details of approval and expenditure of funds for the last three years is at Annexure.